

On-site Wastewater Treatment Systems Inspector Certification Application Package

FORMS MAY BE PHOTOCOPIED

The following information and instructions are provided to assist you in completing your application for certification. Please review each section thoroughly. Failure to properly fill out the application will result in delays and may cause postponement of your examination or certification.

Certification Requirements

Washington law and administrative code (*RCW and WAC*) require that qualified applicants for certification obtain a written request from the local health director or designee. For specific details refer to RCW 18.210.190 and WAC 196-32-030.

Deadlines/Timelines

Examination

The absolute latest date for submitting an application for an examination is three (3) months before the date of the examination. An examination schedule is enclosed for your reference. Applications **received** after that date will be considered for the next available examination (WAC 196-32-010).

Applicants may withdraw from a scheduled examination without forfeiting their fee by submitting a written notice to the Board office no later than six weeks prior to the date of examination.

The Board receives hundreds of applications for any given examination. Therefore, it is to your advantage to submit your application as early before the deadline as possible.

Disabilities

If you have a disability that requires special accommodation for either access to, or taking the exam, please let us know in writing to allow us to accommodate your needs.

Correspondence

When sending any correspondence to the Board, please include your full name and any change of address or phone number.

Application Status – Information From the Board

After the application has been processed by the Board staff (*approximately one month*) you will receive information specific to the examination approximately two to three weeks prior to the date of the examination.

The examination site locations are strictly a function of facilities available and the number of people taking the examination. Candidates will be notified in writing which examination site to report to.

Note: Do not wait until you have heard from the Board to start studying for the examination. You may not be notified of eligibility until one or two months before the examination date – which may not allow sufficient time to adequately prepare.

Re-exam Fees/Refunds

If an examination is not passed, state law requires that a re-examination fee be paid before you can be scheduled to take the examination again.

The money sent with your application is both the application and examination fee. After an application is processed, the fee is not refundable.

In a rare instance where an application has not yet been processed and the applicant wishes a refund, the fee may be returned. A new application and fee would be required to re-apply. These decisions are made on a case by case basis.

If you have any additional questions about how to complete this application, please write or call the Board's office at (360) 664-1568, fax (360) 664-2551, or e-mail to engineers@dol.wa.gov. You may also schedule a personal appointment with a Licensing Representative.

Application Form and Fee

The Application Form is for you to provide personal data, the fee for examination and certificate, and the written request from your health director.

Fees

The following fees apply:

- Inspector Certificate of Competency Application \$175.00
- Inspector Certificate of Competency re-examination \$100.00

Payment of fee is the responsibility of the applicant.

An application received without the appropriate fee will be returned to you and will not be considered a timely submission.

Make checks or money orders payable to the Washington State Treasurer. Please do not send cash.



BOARD OF REGISTRATION FOR
PROFESSIONAL ENGINEERS
AND LAND SURVEYORS
ON-SITE PROGRAM
P.O. BOX 9048
OLYMPIA, WA 98507-9048

On-site Wastewater Treatment System Inspector Certificate of Competency Application

FOR VALIDATION ONLY

Fees:

Application **\$175.00**

Re-examination **\$100.00**

Make remittance payable to State Treasurer.

Send application with your remittance to:

Department of Licensing

PO Box 9048

Olympia, WA 98507-9048

Applicant Information

Please type or print clearly in dark ink

APPLICANT'S NAME <i>(Last, First, Middle)</i>		BIRTHDATE		SOCIAL SECURITY NO. <i>(Required per RCW 26.23.150)</i>	
CORRESPONDENCE ADDRESS		CITY		STATE	ZIP
					COUNTY
PRESENT POSITION					
Have you previously filed an application with this office? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Health Department Request For Examination

HEALTH DEPT./JURISDICTION					
ADDRESS		CITY		STATE	ZIP
					COUNTY
BUSINESS TELEPHONE NO. ()		E-MAIL ADDRESS		FAX NO. ()	
I hereby request that _____ be allowed to take the On-Site Wastewater Treatment System Designer examination in accordance with RCW 18.210.190. Pursuant to RCW 9A.72.085, I certify under the penalty of perjury that I am the director/director's designee of the health department/jurisdiction indicated above, and thereby qualified to make this request.					
Signature X _____ Date _____					

**Upon Filing, This Application Becomes a Public Record and is
Subject to Public Disclosure Provisions Under RCW 42.56**